



## AMENDMENT / RESPONSE TRANSMITTAL

Applicant : Jones, et al.  
 Appl. No. : 09/659,866  
 Filed : September 12, 2000  
 For : INTEGRATED EMERGENCY  
 MEDICAL  
 TRANSPORTATION  
 DATABASE SYSTEM  
 Examiner : Vivek D. Koppikar  
 Group Art Unit : 3626

## CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

December 17, 2004  
(Date)

John M. Carson, Reg. No. 34,303

**Mail Stop AF**  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

- (X) Amendment and Reply to Office Action in ten (10) pages.
- (X) Declaration Under 37 C.F.R. §121 to Overcome Aeromed in six (6) pages.
- (X) Exhibits A1-A3; B1-B3; C; D; and E1-E3.
- (X) The present application qualifies for small entity status under 37 C.F.R. § 1.27.

The fee has been calculated as shown below:

| FEE CALCULATION    |             |              |                      |              |
|--------------------|-------------|--------------|----------------------|--------------|
| FEE TYPE           |             | FEE CODE     | CALCULATION          | TOTAL        |
| Total Claims       | 25 - 20 = 5 | 2202 (\$25)  | 5 x 25 =125          | \$125        |
| Independent Claims | 3 - 3 = 0   | 2201 (\$100) | 0 x 100 =0           | \$0          |
|                    |             |              | <b>TOTAL FEE DUE</b> | <b>\$125</b> |

- (X) A check in the amount of \$125.00 is enclosed.
- (X) Return prepaid postcard.

(X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.

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